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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

0403 - PENNA

First Named Inventor

MARTIN R. PENNA

COMPLETE IF KNOWN

Application Number

Filing Date

03-09-04

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD + SYSTEM FOR COMPUTER-AIDED TELECOMMUNICATION
AND FINANCIAL TRANSACTIONS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
NONE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/081 108-021
 Approved for use through 1/1/04 DATE 03/01/04
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/> OR <input checked="" type="checkbox"/> Correspondence address below			
Name DOROTHY S. MORSE, ESQ.			
Address 515 PARK DRIVE, NW			
City BRADENTON	State FLORIDA	ZIP 34209-1847	
Country UNITED STATES	Telephone 941-747-4313	Fax 941-748-4005	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) MARTIN RANCEL		Family Name or Surname PENA	
Inventor's Signature <i>Martin R. Rancel</i>		Date 03-09-04	
Residence: City CHARLOTTE	State NC	Country US	Citizenship US
Mailing Address 11639 PAINTED TREE ROAD			
City CHARLOTTE	State NC	ZIP 28226	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional verifiers or legal representatives are being named on the supplemental sheets: PTO/SB/02A or OLR attached hereto.			

(Page 2 of 2)

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**POWER OF ATTORNEY
 and
 CORRESPONDENCE ADDRESS
 INDICATION FORM**

Application Number	
Filing Date	MARCH 9, 2004
First Named Inventor	MARTIN E. PENN
Title	METHODS AND SYSTEMS FOR PROVIDING TELECOMMUNICATIONS
Art Unit	5 HANDED TELECOMMUNICATIONS
Examiner Name	
Attorney Serial Number	0403 - PENN

I hereby appoint

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below.

Name	Registration Number
DOROTHY S. MORSE, ESQ.	38,977

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	DOROTHY S. MORSE, ESQ.				
Address	515 PARK DRIVE, NW				
City	WASHINGTON	State	FL	Zip	3209-1847
Country	UNITED STATES				
Telephone	401-747-4313	Fax	941-748-4003		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.71(b) is required. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Name	MARTIN E. PENN
Signature	<i>Martin E. Penn</i>
Date	03-09-04
Telephone	

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representatives is required. If more than one signature is required, see notice.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to enable or retain a benefit by the person which is to be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 172 and 37 CFR 1.14. This collection is not meant to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time may vary depending upon the individual case. Any comments on the burden of this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22213-1450. DO NOT SEND FEE OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22213-1450.

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